# Instructions for Use

### i-PAD CU-SP2

The information in these Instructions for Use applies to the i-PAD CU-SP2. This information is subject to change. Please contact CU Medical Systems, Inc. or its authorized representatives for information on revisions.

### **Revision History**

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#### **Medical Device Directive**

The i-PAD CU-SP2 complies with the requirements of the Medical Device Directive 93/42/EEC and its revisions.



#### Important:

Quick defibrillation is needed if sudden cardiac arrest (SCA) occurs. Since the chance of success is reduced by 7% to 10% for every minute that defibrillation is delayed, defibrillation must be performed promptly.

However, defibrillation may not work on some patients even when administered promptly due to the fundamental causes of SCA. The i-PAD CU-SP2 is manufactured by:

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**CU Medical Systems, Inc.** 

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# Introduction

These Instructions for Use contain information necessary for the correct use of this device.

Please contact us regarding any questions or issues on the use of the device arising from information found in these Instructions for Use [Chapter 8: Device Service].

The company or its authorized distributor is not responsible for any injury incurred by the user or patient due to any apparent negligence or improper use by the user.

Hereinafter, "Device" refers to [CU-SP2], "We" or "Us" refers to CU Medical Systems, Inc.,

"Pads" refers to disposable defibrillation electrode pads for adult or pediatric modes, and "Battery Pack" refers to the rechargeable or disposable battery pack.

These Instructions for Use emphasize the safety procedures and precautions for the device use by using the terms below. Please acquaint yourself with the warnings, cautions and references stated in these Instructions for Use in order to safely use the device.



Conditions, hazards, or unsafe practices that can result in serious personal injury or loss of life.

# 

Conditions, hazards, or unsafe practices that can result in minor or moderate personal injury, damage to the device, or loss of treatment data stored in the device, particularly if precautionary steps are not taken.

#### NOTICE

Used to denote items that are important during installation, operation, or maintenance of the device.

# **Overview**

Thank you for purchasing the i-PAD CU-SP2. This device can be effectively and safely used for a long period if you familiarize yourself with the instructions, warnings, precautions, and notices contained in these Instructions for Use prior to its use.

This device is a semi-automated external defibrillator that can be administered on sudden cardiac arrest (SCA) patients.

# / WARNING

 A defibrillator discharges electric shock with high voltage and current. You must be wellacquainted with the instructions, warnings, and precautions contained in these Instructions for Use.

Users of this device must follow these instructions.

- You must follow the instructions, warnings, cautions, and notices in these Instructions for Use when using this device.
- The manufacturer or its authorized distributor will not be responsible for any problems involving the device that are caused by the user's negligence.
- This device shall be serviced only by the manufacturer or its authorized service centers.
   The manufacturer or its authorized service centers will not be liable for devices serviced at the user's own discretion.
- If the device is intended to be connected to equipment other than that stated in these Instructions for Use, contact the manufacturer.
- If this device does not operate properly, contact the manufacturer or its authorized service center.

# 1. Product Information

### 1.1 Device Description

**CU-SP2** is an easy-to-use Semi-Automated External Defibrillator (AED) that is small, light, and portable, and uses a battery.

The AED automatically or manually reads the sudden cardiac arrest (SCA) patient's electrocardiogram (ECG) and determines if a cardiac arrest that requires defibrillation has occurred, so that licensed emergency medical technicians, medical professionals and the general public can easily operate it. SCA can occur anytime to anyone at any place and may threaten the patient's life if the appropriate CPR and/or electric shock with a defibrillator are not applied within a few minutes.

#### 1.2 Indicated Use

The i-PAD CU-SP2 is indicated for use on patients that are exhibiting the symptoms of sudden cardiac arrest (SCA) with all of the following signs:

- No movement and no response when shaken
- No normal breathing

If the patient is suspected of displaying the symptoms above, attach the pads and use the defibrillator according to each step of the voice instructions.

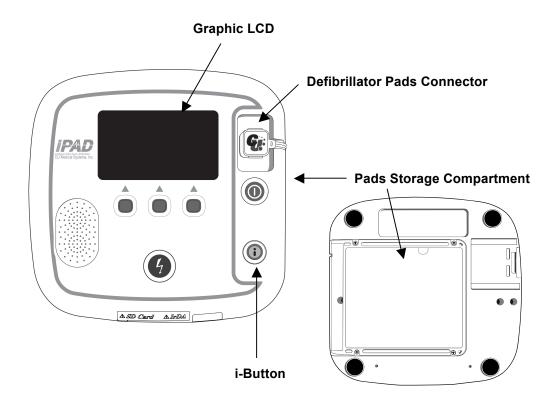
### 1.3 Intended Users

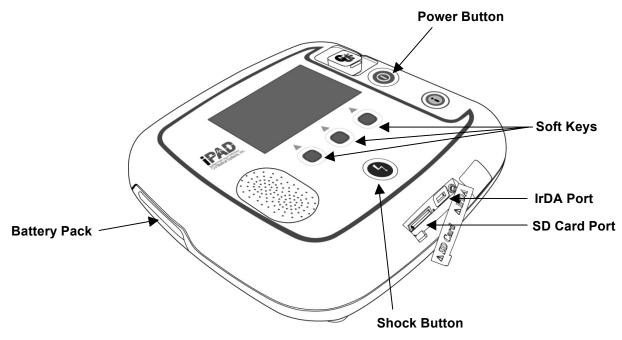
The i-PAD CU-SP2 is intended for use by licensed emergency medical technicians or medical professionals. Also, the general public untrained in CPR or the use of the defibrillator may use this device according to its settings. However, the manufacturer recommends that inexperienced users complete training in CPR or the use of the defibrillator for quick and systematic emergency treatment.

### 1.4 Additional Information

Please contact CU Medical Systems, Inc. or its local distributors for any additional information on the i-PAD **CU-SP2**. We will help to answer all of your questions.

# 2. Device Features





**Power Button** Turns the device on or off. (When the device is on, a green

LED is lit.)

**i-Button** - Provides the following information by voice and LCD screen

· Reports device usage

(the total hours of the last usage and number of shocks)

· Checks the S/W version

· Checks for errors

- Transmits event and ECG data through IrDA and SD Card

**Graphic LCD** Displays the current status of the device, user's guide, ECG,

heart rate, etc.

**Shock Button** Delivers defibrillating shock when pressed.

**Defibrillator Pads Connector** Connects with the connectors of the pads.

Battery Pack The rechargeable (disposable is optional) power source of the

device.

IrDA Port Transmits and receives treatment data between the device

and a personal computer.

SD Card (External Memory)

Port

Port for copying device records to an SD card.

**Soft Keys** Three buttons that control device settings and movements.

Pads Storage

Compartment

Stores pads.

# 3. Preparation for Use

# 3.1 Standard Package Contents

The following are the standard package contents of this device.



**CU-SP2 Semi-automated External Defibrillator** 



Instructions for Use



1 Battery Pack (Rechargeable)



1 Pack of Adult Pads (Disposable)



**Battery Charge Dock** 



**Battery Charger** 

# 3.2 Key Accessories



1 Pack of Pediatric Pads



IrDA Adapter



1 Battery Pack (Disposable)



**SD Card** 



Printer



**CU-EM1 (ECG Transmission Device)** 

The accessories above are not included in the standard package contents.

Please contact us after referring to [Appendix A: Parts and Accessories] for additional supplies.

NOTICE

• Please keep spare pads and battery packs handy to quickly respond to emergency situations.

## 3.3 Preparation for Use

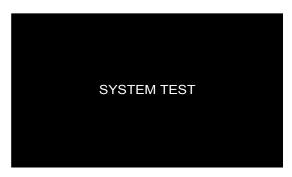
Do the following to set up the i-PAD CU-SP2.

- ① Open the package and verify that it contains all the items listed in the packing list.
- ② Familiarize yourself with the device features by referring to [Chapter 2: Device Features] of these Instructions for Use.
- ③ Insert the battery pack into the battery compartment on the device as shown in the figures below.





As the battery pack is inserted, the device starts a self-test and displays the following on the Monitor LCD.



After the self-test is complete, the device will automatically shut down.

If the self-test fails, please refer to [Chapter 7: Troubleshooting] of these Instructions for Use.

- ④ If you have a carrying case, please safely store the device in the carrying case. If you want to purchase the carrying case, please contact us by referring to [Appendix A: Parts and Accessories] of these Instructions for Use.
- ⑤ Store the device referring to the following considerations.
  - You must store the defibrillator according to the storage policy. Please refer to [Section 6.1: Device Storage] for proper device storage instructions.
  - Store the defibrillator in an easy-to-access location where its technical alarms can be easily heard (e.g. alarm on low battery or other device problems).
  - Store the accessories along with the device in the device's carrying case for easy and quick access.



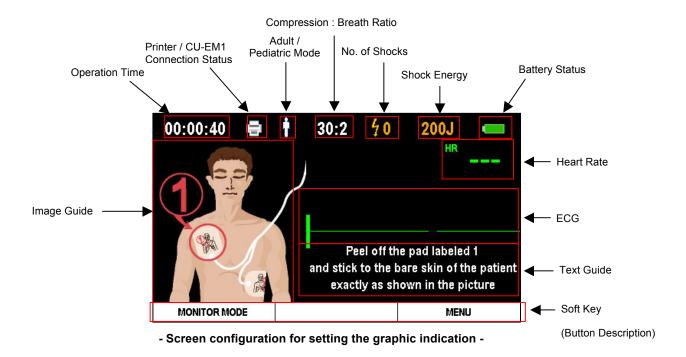
- Electromagnetic interference may affect the performance of the device. While the device is in use, it should be kept away from devices that cause electromagnetic interference.

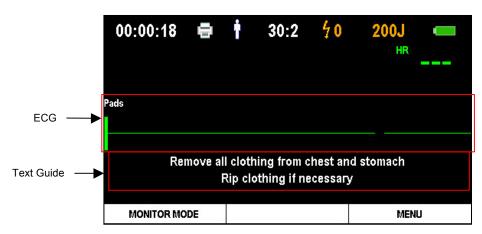
  Devices that may cause such interference include motors, X-ray equipment, radio transmitters, and cell phones. Please refer to [Appendix D: Electromagnetic Compatibility] of these Instructions for Use for more information.
- The use of accessories or cables other than those referred to in these Instructions for Use
  may increase electromagnetic radiation from the device or reduce the device's
  electromagnetic immunity. Only accessories and cables that are authorized by the
  manufacturer should be used with the i-PAD CU-SP2.

# 4. How to Use the i-PAD CU-SP2

### 4.1 LCD Screen

The configuration of the Graphic LCD Screen is as shown below. The screen configuration can be changed according to the 'Graphic Indication'. For detailed instructions on setting the 'Graphic Indication', please refer to [Section 5.4: Device Setup] of these Instructions for Use.





- Screen configuration for unsetting the graphic indication -

Image Guide Uses the image to guide the user in operating the device. **Operation Time** Displays the actual operation time of the device. Printer / CU-EM1 Displayed when using the Printer / CU-EM1. **Connection Status** • Printer: • CU-EM1: Adult / Pediatric Mode Changes based on the Adult/Pediatric Mode of the device. Adult: Pediatric: Compression: Breath - Displays the CPR setting of the device. Ratio - Can be changed by pressing the Soft Keys during operation when in Pediatric Mode. - The chest compression number is fixed to 30 when in Adult Mode. No. of Shocks Displays the number of administered shocks. Shock Energy Displays the amount of shock energy administered to the patient. **Battery Status** Displays the status of the battery in 4 steps. Step 1: — The battery is full. Step 2: Less than half of the battery is remaining. Step 3: Less than 1/4 of the battery is remaining. Step 4: - The battery is almost depleted. **Heart Rate** Displays the heart rate of the patient after the pads are attached. **ECG** Displays the ECG of the patient after the pads are attached. **Text Guide** Uses the text to guide the user in operating the device.

Describes the functions of the three Soft Keys.

**Button Description** 

- The Graphic LCD Screen illustrated in these Instructions for Use may not match the actual screen during operation depending on the device settings.
- The Printer and CU-EM1 are not a part of the standard package contents. If you want to purchase them, please contact us by referring to [Appendix A: Parts and Accessories] of these Instructions for Use.

# 4.2 Soft Keys

There are three Soft Keys in the center of the i-PAD CU-SP2, which operate the device and the menu mode. The Soft Keys operate in two modes: Operation Mode and Menu Mode.

When in Operation Mode, the functions of the Soft Keys are changed according to the 'Manual Override'. For further details on 'Manual Override', please refer to [Section 5.4: Device Setup] of these Instructions for Use.

- Soft Keys are labeled 1~3 from left to right.

Soft Key Functions in Menu Mode		
Button 1	Moves left/up on the menu.	
	Selects or sets the current item.	
Button 2	Plays ECG (used when loading previous ECG).	
	Pauses ECG (used when loading previous ECG).	
Button 3	Moves right/down on the menu.	

For further details on the Menu Mode and the use of Soft Keys in Menu Mode, please refer to [Section 5.4: Device Setup] of these Instructions for Use.

- Soft Keys are labeled 1~3 from left to right.

Soft Key Functions in Operation Mode (Before attaching pads on the patient)		
Button	Indication	Function
	MONITOR MODE	When pressed, the i-PAD CU-SP2 will attempt to
		establish Bluetooth connection to the CU-EM1 (ECG
		transmission device). If successful, the device will
		operate in Monitor Mode.
Button 1		In Monitor Mode, ECG analysis and shock treatment
Bullon 1		will not be available.
	SEMI-AUTO	The Defibrillation Mode will operate under Monitor
		Mode. When pressed, the i-PAD CU-SP2 will sever its
		connection to the CU-EM1 and transition into the
		Operation Mode, which will enable defibrillation.
	30:x	This function is activated when the 'No. of Chest
		Compressions' under the CPR setting of the device is
Button 2		set to '15 times'. When pressed, the setting will
Bullon 2		change to '30 times'.
		(The 'x' refers to the 'No. of Artificial Respirations'
		under the CPR setting.)

	15:x	This function is activated when the 'No. of Chest
		Compressions' under the CPR setting of the device is
		set to '30 times'. When pressed, the setting will
		change to '15 times'.
		(The 'x' refers to the 'No. of Artificial Respirations'
		under the CPR setting.)
	Menu	When pressed, the device will enter the Menu Mode.
Dutton 2		For further details on the Menu Mode, please refer to
Button 3		[Section 5.4: Device Setup] in these Instructions for
		Use.

# - Soft Keys are labeled 1~3 from left to right.

S	Soft Key Functions in Operation Mode (After attaching pads on the patient)		
Button	Button Indication Function		
	ANALYZE	When pressed, the device will start analyzing the patient's ECG.	
	STOP	This function is activated while the device is analyzing the patient's	
	ANALYZE	ECG. When pressed, the device will stop analyzing the patient's ECG.	
Button 1	Charge	When pressed, the device will start charging energy for administering	
Bullon		a shock.	
		This function is activated while the device is charging energy. When	
	DISARM	pressed, the device will stop charging and internally discharge the	
		energy stored within the device.	
	30:x	This function is activated when the 'No. of Chest Compressions' under	
		the CPR setting of the device is set to '15 times'. When pressed, the	
		setting will change to '30 times'.	
		(The 'x' refers to the 'No. of Artificial Respirations' under the CPR	
Button 2		setting.)	
Button 2		This function is activated when the 'No. of Chest Compressions' under	
	15:x	the CPR setting of the device is set to '30 times'. When pressed, the	
		setting will change to '15 times'.	
		(The 'x' refers to the 'No. of Artificial Respirations' under the CPR	
		setting.)	
	CPR START	When pressed, the device will guide you through CPR.	
Button 3	STOP CPR	This function is activated while the device is guiding you through CPR.	
		When pressed, the device will stop the CPR guidance.	

For further details on the functions of the Soft Keys, please refer to [Section 4.5: Defibrillation in Adult Mode] and [Section 4.6: Defibrillation in Pediatric Mode] in these Instructions for Use.

#### NOTICE

- Button 2 is activated only when the device is set to Pediatric Mode.
- When 'Manual Override' is set to 'OFF', Soft Keys 1 and 3 will be deactivated after attaching the pads on the patient.

## 4.3 Procedure for Using the Device

If you think that you are witnessing someone suffering sudden cardiac arrest, perform the chain of actions recommended by the Korean Association of Cardiopulmonary Resuscitation (KACPR) and the American Heart Association (AHA) in their Chain of Survival emergency response to sudden cardiac arrest.



- 1. Immediate recognition and activation of the emergency response system Activate the community emergency response system (e.g. call 911 or the equivalent service in your locality).
- 2. Early CPR Perform CPR.
- 3. Early defibrillation Use this device (i-PAD CU-SP2).

Using this device can be summarized in 3 steps:

After pressing the Power Button,

- Step 1: Place pads on the patient.
- Step 2: Press the Shock Button when instructed by the device.
- Step 3: Perform CPR.
- 4. Effective advanced life support Perform advanced care in order to restore spontaneous circulation.
- 5. Integrated post-cardiac arrest care Transfer the patient to a medical institution or a specialized facility.

#### NOTICE

• When you witness someone suffering sudden cardiac arrest, you must perform the chain of actions recommended by the Korean Association of Cardiopulmonary Resuscitation (KACPR) and the American Heart Association (AHA) in their Chain of Survival emergency response to sudden cardiac arrest. If finding and/or operating the defibrillator takes time, monitor the patient's status and activate the emergency response system until the defibrillator is available, and perform CPR if necessary.

## 4.4 Preparation for Defibrillation

1 Turn the device on by pressing the Power Button.

When the power turns ON the following occurs in sequence:



- Beeper: The beeper will beep for 1 second.
- A self-test will be initiated.
- The device will give voice instructions to call emergency medical services and on the 'Adult/Pediatric Mode'.
- The guide on how to use the device will be given through the LCD Screen and by voice.

# <u> </u> WARNING

- Never perform defibrillation in pediatric mode to a patient who is either heavier than 25 kg or older than 8 years old.
- You can change the adult/pediatric mode under Menu Mode after turning on the i-PAD CU-SP2. However, the defibrillation mode should be changed before placing the pads on the patient. Once the pads are in place, you cannot change the defibrillation mode anymore.
   When the mode is correctly selected, the defibrillation energy is set to an adult value (150 J / 200J) or pediatric value (50 J).
- For further details on setting the menu, please refer to [Section 5.4: Device Setup] of these Instructions for Use.

# 2 Remove clothes from patient's chest.



# ↑ CAUTION

- Time is essential for the cardiac arrest patient. Thus, time should not be wasted in completely removing their clothes. Tear or cut clothes to attach the pads as soon as possible, if removing them will take too much time.
- Dry the patient's skin such that the pads can adhere well on the chest. Shave chest hair if necessary.
- Avoid laying the patient on conductive locations, such as metal, an electric pad, and water.
- ③ Remove the pads package from the Pads Storage Compartment at the bottom of the device.



4 Open the pads package and take out the pads.



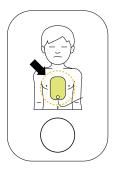
⑤ Refer to the pictures on both pads and accurately identify the locations where the pads will be attached.

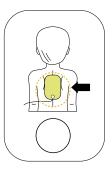
### **Adult Pads**





### **Pediatric Pads**





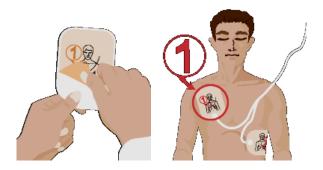
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- The adhesive material on the pads starts to dry out as soon as the package is opened. Use immediately after opening.
- For procedures on checking the expiration date of the pads and maintaining them, please refer to [Section 6.2: Maintenance] of these Instructions for Use.

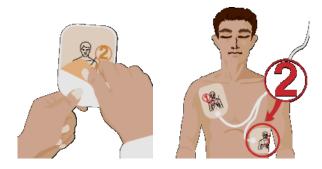
### 4.5 Defibrillation in Adult Mode

### Step 1: Place pads on the patient.

① Remove pad **1** from the single liner and stick the pad to the patient's upper right chest below the collarbone as shown below.



② Remove pad **2** from the single liner and stick the pad to the patient's left side torso in line with the armpit as shown below.



③ If the device detects the connection to the patient after placing the pads, follow the voice instructions of the device.

- Defibrillation can be done even if the pads are reversed. If the locations of the pads are switched, follow the next voice instruction without changing the directions of pads. It is more important to begin defibrillation as soon as possible.
- In the event the pads are not adhering well, check if the adhesive side of the pads is dry. Each pad has an adhesive gel. If the gel does not adhere well, replace it with a new pad.

#### Step 2: Press the Shock Button when instructed.

The device acquires and analyzes the patient's ECG immediately after being connected.

According to the device settings, automatic analysis will become available, along with

ANALYZE and CHARGE. If the device is set to automatic analysis, the device will automatically start analyzing the ECG as soon as the pads are attached to the patient.



# 

Do not touch the patient when the device instructs you not to touch the patient. The ECG
analysis may become inaccurate if you touch the patient during the analysis.

### If the patient needs defibrillation after the ECG analysis, the device will do the following:



- The device announces that a defibrillation shock is needed, and instructs you to keep away from the patient.
- When armed, the device will continuously beep while the Shock Button flashes in orange.
- The device instructs you to press the flashing orange Shock Button.

You should press the Shock Button at this time.

When the Shock Button is pressed, the device delivers a defibrillating shock to the patient. If defibrillation is properly done, the device reports that an electric shock has been delivered. After shock delivery, the device indicates that you may touch the patient and issues voice instructions on CPR.

If the flashing Shock Button is not pressed within 15 seconds, the device will cancel the shock delivery and disarm. Then the device issues CPR instructions.

### If the patient does not need defibrillation, the device will do the following in sequence:

The device announces that the patient does not need a defibrillating shock and that you may touch the patient. Then the voice instruction for CPR starts.

# / WARNING

- When administering defibrillation, do not position the patient on conductive fluids. If the patient's skin is wet, remove the moisture prior to using the device.
- When administering defibrillation, remove all other medical equipment on the patient that is unprotected from the defibrillating shock.
- The user and everyone near the patient must avoid making the following contacts.
  - · Do not touch any body parts of the patient, such as the body, head, arms, and legs.
  - · Do not touch any conductive fluids, such as gel, blood, and saline.
  - Do not touch any conductive metal objects, such as a stretcher or wheelchair.
     Making such contacts may provide unwanted pathways for the defibrillating current.
- The user must not touch the patient when pressing the Shock Button. The defibrillating shock may harm the user or bystanders.

- After starting the ECG analysis, the device will continue the analysis up to the point of
  pressing the Shock Button. When the patient's ECG returns to a state that does not require
  defibrillation, the device will disarm itself. It will then reanalyze the patient's ECG.
- As a safety measure, the device will not deliver a shock until the flashing orange Shock Button is pressed. If the Shock Button is not pressed within 15 seconds of the voice instruction to press the Shock Button, the device will disarm itself and instruct you to make sure that emergency medical services have been called. The device will then instruct you to begin CPR.
- If the device malfunctions during a rescue operation, it will instruct you to get a replacement defibrillator and will start the voice instruction for CPR. Perform CPR until the replacement equipment is ready to use.

### Step 3: Perform CPR.

The user must immediately perform CPR while temporarily suspending emergency treatment on the patient. During this step, the device will give voice instructions for the pause period. When voice instruction for CPR is needed, press the flashing blue i-Button within 15 seconds. For further details on CPR, please refer to the [CPR Method] below.

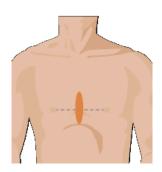
### [CPR Method]

### 1. Compression Point

Place the heel of your hand in the middle of the patient's chest between the nipples (which is the lower half of the sternum), and put the heel of your other hand on top of the first so that your hands are overlapping and parallel. Then, spread or lock your fingers without touching the chest. Keep your elbows straight and your arms vertical to the ground, and use your weight to start the compression.

### 2. Compression Speed and Depth

Compress the chest at least 5cm (up to 6cm) deep, and at a rate of at least 100 compressions per minute (up to 120 times).





### 3. Opening the Airway

While lifting the patient's chin up, tilt the head backward to open the airway.



### 4. Artificial Respiration Method

Pinch the patient's nose as shown in the figure below, place your mouth over the patient's mouth, and blow in sufficient air to make the chest rise significantly.



# 

After the CPR guidance, the device automatically starts reanalysis of the patient's ECG
according to the device settings, or the user can press 'ANALYZE' button to start the
reanalysis. Do not touch the patient once the device starts to reanalyze the patient's ECG.

- If you have not been trained in CPR or are unconfident at administering artificial respiration, you should perform only chest compression or follow the instructions of the emergency medical services' agent on the phone.
- If you are trained for CPR and capable of performing artificial respiration, perform chest compression along with artificial respiration.
- The CPR guidance can be set under Menu Mode. For further details, please refer to [Section 5.4: Device Setup] on these Instructions for Use.
- In order to safely turn the device off after use, press the Power Button for at least 1 second.

#### 4.6 Defibrillation in Pediatric Mode

When the patient is between 1 year old and 8 years old, defibrillation can be done using the pediatric pads. When the device is connected through **pediatric pads**, it automatically sets the defibrillation energy to 50J and provides pediatric CPR guidance.

Turn on the device and remove clothes as directed by the voice instructions to expose the patient's chest and back. Place pads on the middle of the chest and back as illustrated below. Pads are not specific to either chest or back. You may attach them regardless of direction.



If there are no pediatric pads for the pediatric patient, use adult pads but set the 'Adult/Pediatric Mode' to Pediatric Mode under Menu Mode, and then perform defibrillation according to the voice instructions.

- Follow the instructions below when giving first aid during a pediatric cardiac arrest.
  - · When giving first aid during a pediatric cardiac arrest, ask others to call the emergency medical center and to bring an i-PAD CU-SP2 while you are performing pediatric CPR.
  - · Since most pediatric cardiac arrests are caused by suffocation rather than heart failure, when there is no one else around, perform CPR for 1 to 2 minutes, call the emergency medical services, and then get an i-PAD CU-SP2.
- The Adult/Pediatric Mode can be changed under Menu Mode. For further details, please refer to [Section 5.4: Device Setup] in these Instructions for Use.

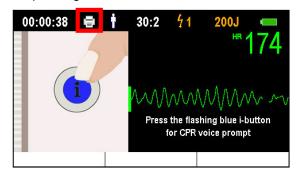
### 4.7 Printer

The i-PAD CU-SP2 supports connection to an external Bluetooth printer. Please familiarize yourself with the User's Manual for the printer prior to use.

To use the printer, you must first pair the CU-SP2 and the printer in Menu Mode. For further details on pairing the printer, please refer to [Section 5.4: Device Setup].

A printer needs to be paired only once, and will be automatically connected in the future. However, you will need do pairing again for a different printer.

If the printer is in use, you can check the printer icon on top of the LCD Screen while the device is operating.



When a paired printer is turned on while administering defibrillation on the patient, ECG and event analysis from the point of the ECG analysis to the defibrillation will be printed.

- Printers not designated by the manufacturer are not compatible with the i-PAD CU-SP2.
- Turn on the printer prior to use.
- The printer can be connected and used with up to 10m of open space between the printer and the i-PAD CU-SP2.
- The printer is not a part of the standard package contents. If you want to purchase the printer, please contact us by referring to [Appendix A: Parts and Accessories] of these Instructions for Use.

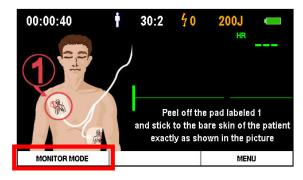
### 4.8 Monitor Mode

Monitor Mode is used in connection with the CU-EM1 (ECG transmission device). In Monitor Mode, the i-PAD CU-SP2 uses Bluetooth to receive ECG data from the CU-EM1 and displays it on the LCD Screen. When using Monitor Mode, the pads cannot be used and defibrillation cannot be performed. If you think that defibrillation is necessary while using Monitor Mode on the patient, immediately turn Monitor Mode off and administer defibrillation.

To use the CU-EM1, you must first pair the CU-SP2 and the CU-EM1 in Menu Mode. For further details on pairing the CU-EM1, please refer to [Section 5.4: Device Setup] in these Instructions for Use.

The CU-EM1 needs to be paired only once, and will be automatically connected in the future. However, you will need to do pairing again for a different CU-EM1.

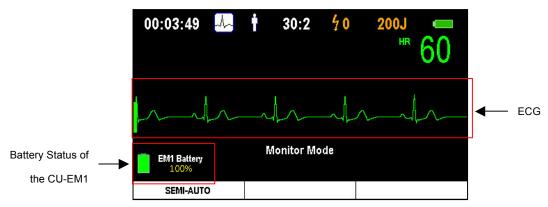
To use Monitor Mode, press Soft Key 1, which reads 'Monitor Mode', without attaching the pads on the patient.



When pressed, the device will attempt to connect with the CU-EM1.



After connecting to the CU-EM1, the device will shift into Monitor Mode, receive ECG data from the CU-EM1, and display the data on the LCD Screen.



- Screen configuration for Monitor Mode -

**ECG** Displays the ECG data received from the CU-EM1 via Bluetooth.

Battery Status of the Displays the battery status of the connected CU-EM1 from 0% to CU-EM1 100% in 10% units.

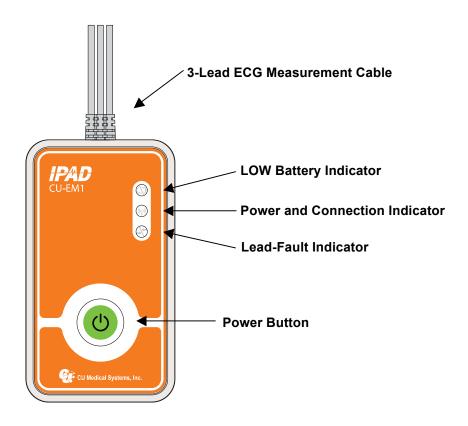
To turn off Monitor Mode, press Soft Key 1, which reads 'SEMI-AUTO'. When pressed, the device will shift into defibrillation mode.

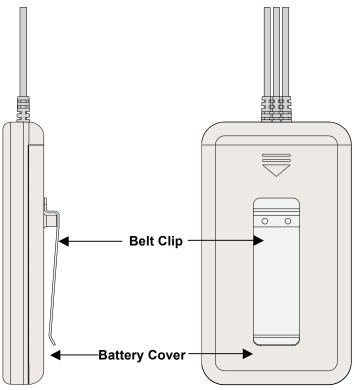


- ECG transmission devices not designated by the manufacturer are not compatible with the i-PAD CU-SP2.
- Turn on the CU-EM1 prior to use.
- The CU-EM1 can be connected and used with up to 10m of open space between the CU-EM1 and the i-PAD CU-SP2.
- The CU-EM1 is not a part of the standard package contents. If you want to purchase the CU-EM1, please contact us by referring to [Appendix A: Parts and Accessories] of these Instructions for Use.

# 4.9 CU-EM1 (ECG Transmission Device)

# 4.9.1 Device Features





# 4.9.2 Button and Indicators

Indicator	Description
O	Power Button This button turns the CU-EM1 on and off.
	LOW Battery Indicator  The red indicator will light when the remaining battery of the CU-EM1 falls below 10%.  You need to recharge the battery when the LOW Battery Indicator is on.
	Power and Connection Indicator  The blue indicator will light when the CU-EM1 is turned on. When the CU-SP2 is switched to Monitor Mode and transmitting via Bluetooth, the blue indicator will blink in 1 second intervals.
	Lead-Fault Indicator  The green indicator on Lead-Fault will light if the ECG Measurement Cable is not properly connected to the patient, the cable is faulty, or the ECG pads are faulty.

# 4.9.3 Beeper

Indicator	Description
1 long beep	Beeps when the CU-EM1 is turned on.
2 long beeps	Beeps when the CU-EM1 is turned off.
3 long beeps	Beeps when the CU-EM1 is paired with the CU-SP2.
1 short beep	Beeps in 10 second intervals when in standby for connecting to the CU-SP2 in Monitor Mode.
2 short beeps	Beeps when connecting to the CU-SP2 in Monitor Mode.
3 short beeps	Beeps when disconnecting Monitor Mode or the Bluetooth connection,
5 short beeps	including unstable Bluetooth connections or communication problems.

#### 4.9.4 How to Use the CU-EM1

### 1 Turn the device on by pressing the Power Button.

When the power of the CU-EM1 is turned ON, the following occurs in sequence:



- Beeper: The beeper will beep for 0.5 seconds.
- Connection Indicator: The blue indicator will light.

### 2 Attach the 3-Lead ECG Measurement Cable to the patient.

Attach the 3-lead disposable ECG pads.

#### 3 Turn on the Monitor Mode in the CU-SP2.

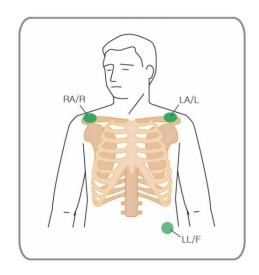
For further details on using the Monitor Mode, please refer to [Section 4.8: Monitor Mode] in these Instructions for Use.

### 4.9.5 Where to Attach ECG Pads

- RA/R: Below the right collarbone

- LA/L: Below the left collarbone

- LL/F: Left side torso



# ⚠ CAUTION

- Using expired disposable ECG pads or disposable ECG electrodes with damaged packaging will not guarantee accurate measurement of ECG.
- The disposable ECG pads must be firmly adhered to the patient's skin. Keep the attachment areas dry.

- For further details on charging the battery of the CU-EM1, please refer to [Section 6.2: Maintenance] of these Instructions for Use.
- In order to turn the CU-EM1 off after use, press the Power Button for at least 1 second.

# 4.10 Manual Override (Not Option)

This function will be installed by default if manual override has been optionally added upon purchasing the CU-SP2.

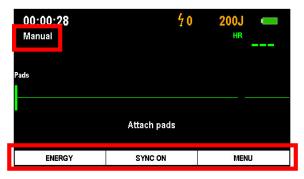
To use the manual override, you must set the device mode to Manual Override. For further details on setting the manual override, please refer to [Section 5.4: Device Setup] in these Instructions for Use.

When the device mode has been changed to manual override, 'Manual' will be displayed on the upper-left corner of the LCD Screen. Also, the Soft Keys will be activated as follows:

Soft Key 1: **ENERGY** 

Soft Key 2: SYNC ON

Soft Key 3: MENU / CHARGE



# 4.10.1 Changing the Energy Value

When in manual override, the user can set the energy value for defibrillation. The range of the output energy will change depending on Adult / Pediatric Mode. For further details on changing the Adult / Pediatric Mode, please refer to [Section 5.4: Device Setup] in these Instructions for Use.

Press Soft Key 1, which reads 'ENERGY', to change the energy setting.



When pressing Soft Key 1, the output energy value displayed on the upper-right corner of the LCD Screen will be highlighted in white. Also, the Soft Keys will be activated as follows:

Soft Key 1: ▲ (INCREASE ENERGY)

Soft Key 2: ▼ (DECREASE ENERGY)

Soft Key 3: CONFIRM

At this time, use Soft Keys 1 and 2 to change the energy value and press Soft Key 3 to confirm.



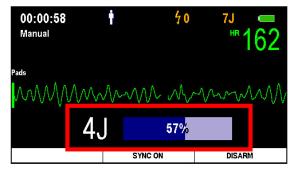
#### - Output energy values for Adult / Pediatric Mode

Adult / Pediatric Mode	Output Energy	
Adult	2J, 3J, 5J, 7J, 10J, 20J, 30J, 50J, 70J, 100J, 150J, 200J	
Pediatric	2J, 3J, 5J, 7J, 10J, 20J, 30J, 50J	

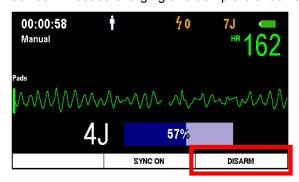
# 4.10.2 Charging the Device and Administering Electric Shock Treatment

In manual override, the user may use their own discretion to charge the energy and administer defibrillation.

After attaching the pads on the patient, press 'Charge' using Soft Key 3 if you believe that the patient requires defibrillation based on the ECG value. When pressing Soft Key 3, the device will start charging according to the set energy level along with a charging sound. The charged energy amount can be checked on the LCD Screen.



If you want to stop charging, press the 'DISARM' button using Soft Key 3. When pressed, the device will cease charging and dump the shock energy internally.



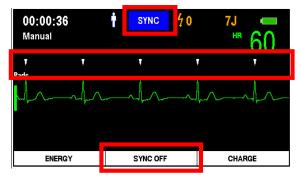
When armed, the Shock Button will flash in orange to signal readiness for defibrillation. At this time, you can administer defibrillation by pressing the Shock Button.

If the flashing Shock Button is not pressed within 15 seconds, the device will automatically cancel the shock delivery and disarm.

# 4.10.3 Using R-Sync

When the device is switched to manual override, Soft Key 2 will be activated as 'SYNC ON'. Pressing Soft Key 2 will display the SYNC symbol in the upper-center of the LCD Screen and enable administration of R-Sync energy.

Using R-Sync will detect the R-wave of the patient's ECG, and display the R-Sync mark on the LCD Screen with a short beep.



At this time, you may charge shock energy by pressing 'Charge' using Soft Key 3 if you think that defibrillation is necessary.

Press the Shock Button to administer defibrillation. The device will automatically administer defibrillation if R-wave is detected.

To stop using R-Sync, press 'SYNC OFF' using Soft Key 2.

# ⚠ CAUTION

- The usage authority differs for each device mode.
- Manual Override: Only medical professionals may use this mode.
- AED Mode
  - ANALYZE: Only licensed emergency medical technicians or medical professionals may use this mode.
  - CHARGE: Only medical professionals may use this mode.
  - **OFF**: Licensed emergency medical technicians, medical professionals and the general public may use this mode.

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 When administering R-Sync energy, the patient may be administered with defibrillation energy, recognized as R-waves, if there is interference resulting from external contact or if the patient is moved while the pads are attached. Avoid moving or touching the patient while administering R-Sync energy.

#### NOTICE

• Manual Override is an additional option. If you want to add the manual override option, please contact us after referring to [Section A.3: Service Center] in these Instructions for Use.

# 5. After Using the i-PAD CU-SP2

#### 5.1 Maintenance After Each Use

Check the device for signs of damage and contamination. If there is any damage or contamination, please refer to [Section 6.2.3: Cleaning the i-PAD CU-SP2] in these Instructions for Use.

Conduct a self-test on the battery by referring to [Section 7.1: Self-Tests] in these Instructions for Use. If the device shuts down normally after running a self-test on the battery, the device status is normal. The i-PAD CU-SP2 uses disposable pads. Dispose of the used pads and replace them with new pads after checking their expiration date. For further details on replacing the pads, please refer to [Section 6.2.2: Replacing the Pads] in these Instructions for Use.

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- You should use only the defibrillator pads provided by the manufacturer.
- Do not open the pad packaging until immediately before use. Since the adhesive material on the disposable pads starts to dry out as soon as the package is opened, the pads will become unusable after a certain amount of time has elapsed, regardless of the expiration date.

# 5.2 Saving and Transferring Treatment Data

#### 5.2.1 Device Usage

This device automatically saves the following treatment data:

- · ECG data
- · Usage information

The treatment data is automatically saved on the internal memory. This data can be transferred to a personal computer (PC) and is not erased even if the device is turned off.



- The i-PAD CU-SP2 saves the 3 most recent treatments and is able to save up to 17 hours for each event. If more than 17 hours of ECG data are recorded for one event, any ECG data over 17 hours will not be recorded.
- When the device is used more than 3 times, it overwrites the oldest treatment data with the newest data. Therefore, we recommend you to save the recorded treatment data by transferring it to a PC after using the device.
- If the battery pack is removed while the device is operating, the treatment data will not be properly recorded. If you wish to remove the battery pack, turn the power off by pressing the Power Button for more than 1 second, and then remove the battery pack.

## 5.2.2 Transferring Treatment Data

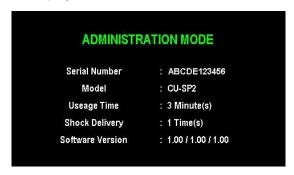
The treatment data may be transferred via an SD card or IrDA. The treatment data of all patients recorded on the device is transferred using the SD card method, whereas the treatment data of one patient is selectively transferred with the IrDA method.

#### 1. Copying Treatment Data by Using an SD Card

- ① Format the SD card on the PC to the FAT (FAT16) format.
- ② Open the SD card cover on the device and insert an SD card into the port.



- ③ When pressing the i-Button for more than 1 second in standby mode, the device will switch to Administration Mode and give instructions by voice and LCD Screen.
- The device displays the summary (the total hours of the last device usage and the number of defibrillation shocks delivered) of the device usage on the LCD Screen.
- ⑤ Displays the S/W version of the device on the LCD Screen.



 When the voice guide instructs to transfer the treatment data, press the i-Button to copy the data onto the SD card.

#### If there is treatment data in the device's internal memory:

The device starts to copy the data after informing the user by voice that the treatment data is being copied onto the SD card.

When copying is completed, the device informs you by voice and automatically shuts down.



## If there is no treatment data in the device's internal memory:

The device informs you by voice that no treatment data exists and automatically shuts down.

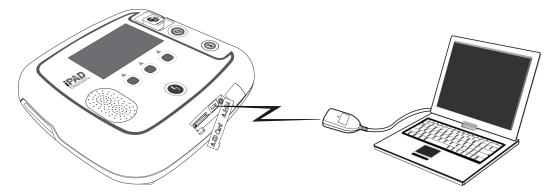
NOTICE

 If the SD card already has the same treatment data file, the device informs the user that the same file already exists upon copying the treatment data onto the SD card. Press the Shock Button to overwrite the existing file or press the i-Button to cancel copying the file.

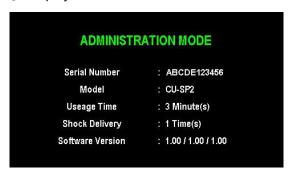
#### 2. Transferring Data via IrDA

The data may be transferred to the PC by using the PC software (CU Expert Ver.3.70 or higher), which is provided by the manufacturer. [CU Expert] is PC software that includes ECG review and printing functions.

- ① Position the IrDA adapter to face the IrDA port on the device as shown in the figure below.
- ② When pressing the i-Button for more than 1 second in standby mode, the device will switch to Administration Mode and give instructions by voice and LCD Screen.



- ③ The device displays the summary (the total hours of the last device usage and the number of defibrillation shocks delivered) of the device usage on the LCD Screen.
- 4 Displays the S/W version of the device on the LCD Screen.



(5) When the voice guide instructs to transfer the treatment data, press the i-Button to transfer the data.

#### If there is treatment data in the device's internal memory:

① The device informs the total number of treatments and information saved on the device by voice and LCD Screen.



- ② There are at most 3 treatment data. The first treatment data is the most recent.
- ③ Press the Shock Button to change the transfer order of the treatment data as follows:
   1st treatment data → 2nd treatment data → 3rd treatment data → 1st treatment data → ...



- ④ If you wish to transfer the selected treatment data, press the i-Button.
- ⑤ Run [CU Expert] on the PC. Please refer to the [CU Expert] manual for further details.
- ⑥ The device is connected to [CU Expert] within a few seconds, and treatment data is automatically transferred.
- ⑦ When the transfer is completed, the device automatically shuts down.

# If there is no treatment data in the device's internal memory:

The device informs you by voice that no treatment data exists and automatically shuts down.



 Maintain a distance of 30cm and an angle of ±15° between the IrDA port on the device and the IrDA adapter. Also since external light sources affect the IrDA, try to use it indoors and away from fluorescent and/or incandescent lamps.

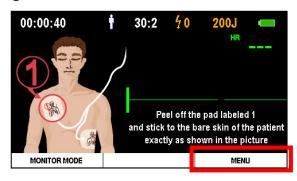
#### NOTICE

• The PC software (CU Expert Ver.3.70 or higher) and the IrDA adapter are not a part of the standard package contents. If you want to purchase them, please contact us by referring to [Appendix A: Parts and Accessories] of these Instructions for Use.

#### 5.3 Data Review

If the Defibrillator Pads Connector has not been inserted or the pads have not yet been attached to the patient, you can press Soft Key 3 on the device to enter Menu Mode. In Menu Mode, you can easily check the device setup and the treatment data saved on the device.

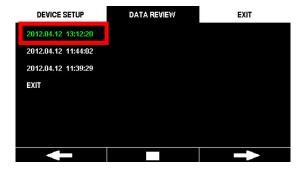
① Press the Menu button to enter Menu Mode.



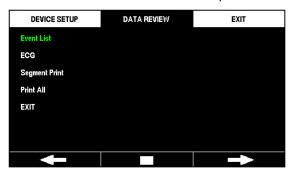
② After entering Menu Mode, press the right arrow button to move to the second tab, 'DATA REVIEW'.



- ③ The saved treatment data is displayed on the left side of the screen.
- ④ Press the confirm button in the center to select the treatment data to review.



⑤ Select the review method. The options are 'Event List', 'ECG', 'Segment Print', and 'Print All'.



- **Event List**: Displays the list of events saved on the device.
- ECG: Displays the ECG data saved on the device.
- Segment Print: The user selects and prints the segment to review.
- Print All: Prints all usage data.

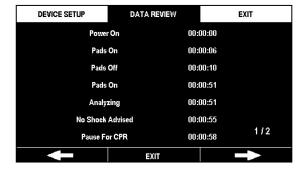
#### 5.3.1 Event List

Select 'Event List' to check the list of events saved on the device.

You can move to the next or previous page by using the Left/Right arrow buttons.

'Event List' displays the history of events on the left and the time elapsed since the last usage of the device on the right.

Press the 'Exit' button in the center to exit 'Event List'.



## 5.3.2 ECG

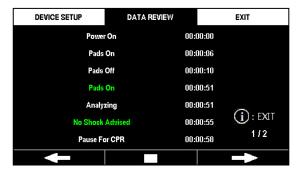
You can check the ECG saved on the device. Select 'ECG' to play the saved ECG. You can press the pause button in the center to stop playing. After stopping, you can move to the next or previous page by using the Left/Right arrow buttons.

Press the i-Button to exit 'ECG'.



# 5.3.3 Segment Print

Select 'Segment Print' to choose and print a segment on the Event List.



You can only select two events in order to identify the start and end of the segment. Once the first event is selected, the device will automatically attempt to connect to the printer after you have selected the second event.



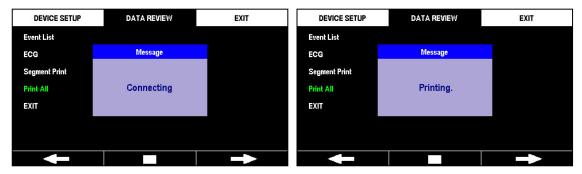
Once connected, the printer will print the ECG and event list of the selected segment. Press the i-Button to stop printing.



#### 5.3.4 Print All

Select 'Print All' to directly connect to the printer. When connected, the device will print all saved events and ECGs.

Press the i-Button to stop printing.

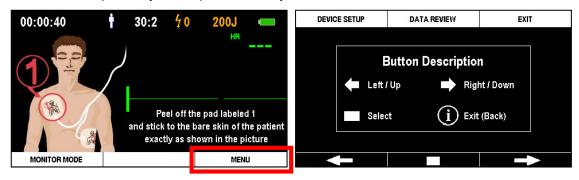


#### NOTICE

- If the device is not paired with a printer, you cannot access 'Segment Print' or 'Print All'.
- For further details on using the printer, please refer to the printer's manual and [Section 4.7: Printer] in these Instructions for Use.
- The printer is not a part of the standard package contents. If you want to purchase a printer, please contact us by referring to [Appendix A: Parts and Accessories] of these Instructions for Use.

## 5.4 Device Setup

In i-PAD CU-SP2, you can set the operation of the device and the CPR guidance under Menu Mode. If the Defibrillator Pads Connector has not been inserted or the pads have not yet been attached to the patient, you can press Soft Key 3 on the device to enter Menu Mode.



Once you enter Menu Mode, the 'Button Description' page is displayed. Press any of the 3 Soft Keys to close the page. In Menu Mode, you can set the operation of the device and the CPR guidance, or check the saved treatment data using the three buttons.

The basic functions of the Soft Keys are as shown below:

- Soft Key 1: Left / Up

- Soft Key 2: Select / Confirm

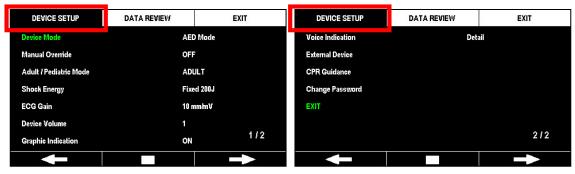
- Soft Key 3: Right / Down

- i-Button: Exit (Back)

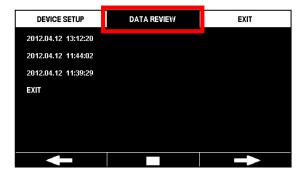
## 5.4.1 Configuring the Menu Mode

Menu Mode is comprised of three tabs.

The first tab is comprised of two pages. You can set the operation of the device, add external devices, set the CPR guidance, and change the password.



The second tab displays the treatment data saved on the device. For further details on 'DATA REVIEW' on the second tab, please refer to [Section 5.3: Data Review] in these Instructions for Use.



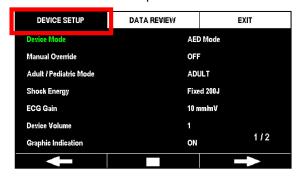
The third tab is for exiting Menu Mode.

#### NOTICE

• If pads are attached to the patient while the device is in Menu Mode, the device will automatically switch from Menu Mode into Operation Mode to enable defibrillation.

#### 5.4.2 Setting the Operation of the Device

The user can set the options below under the 'DEVICE SETUP' tab of Menu Mode.



#### Device Mode

- You must enter the password to change the Device Mode. The default password of the device is Soft Key '1→1→1'. (Soft Keys are labeled 1~3 from left to right.)
- · **AED Mode:** The device manually or automatically executes ECG analysis and defibrillation.
- **Manual Override:** The user can manually set the device's shock energy and administer defibrillation based on user judgment.

#### NOTICE

The Device Mode setup is an additional option. This function will not be installed by default if
Manual Override has not been optionally added upon purchasing the CU-SP2. If you want to
purchase the Device Mode option, please contact us by referring to [Appendix A.3: Service
Center] of these Instructions for Use.

#### Manual Override

- You must enter the password to change the Manual Override. The default password of the device is Soft Key '1→1→1'. (Soft Keys are labeled 1~3 from left to right.)
- · **ANALYZE**: The user can choose to monitor the patient's ECG through the pads, start analyzing the patient's ECG, and start/end the CPR guidance.
- CHARGE: The user can monitor and analyze the patient's ECG through the pads to determine whether to start charging the device's energy for defibrillation. Also, the user can choose to start/end the CPR guidance.
- **OFF**: The device automatically analyzes the patient's ECG when the pads are attached. If defibrillation is necessary, the device will automatically charge the energy necessary for defibrillation and direct the user to administer defibrillation.

# ⚠ WARNING

- The usage authority differs for Device Mode and Manual Override setup, and requires a password. The default password is vulnerable to exposure. We recommend that you change the password on a regular basis.
- Manual Override: Only medical professionals may use this mode.
- AED Mode
  - **ANALYZE**: Only licensed emergency medical technicians or medical professionals may use this mode.
  - CHARGE: Only medical professionals may use this mode.
  - OFF: Licensed emergency medical technicians, medical professionals and the general public may use this mode.

#### Adult / Pediatric Mode

- Adult Mode: The device will operate in Adult Mode. In the case of a pediatric patient, connecting the device with the pediatric pads connector will automatically switch the device to Pediatric Mode.
- **Pediatric Mode**: The device will operate in Pediatric Mode. When set to Pediatric Mode, the device will maintain the mode even if it is connected to the adult pads connector.

#### Shock Energy

- Fixed 150J: The patient will be delivered 150J of shock energy.
- Fixed 200J: The patient will be delivered 200J of shock energy.
- **Escalating (150J-200J)**: The patient will be delivered 150J of shock energy for the first time, and then 200J of shock energy in subsequent shocks.
- Escalating (150J-150J-200J): The patient will be delivered 150J of shock energy for the first and second time, and then 200J of shock energy in subsequent shocks.

#### • ECG Gain

- · 5mm/mV: The ECG graph will be indicated as 5mm/mV on the Graphic LCD Screen.
- 10mm/mV: The ECG graph will be indicated as 10mm/mV on the Graphic LCD Screen.
- · 20mm/mV: The ECG graph will be indicated as 20mm/mV on the Graphic LCD Screen.
- AUTO: The device will automatically set the ECG gain and the ECG graph will be indicated as 10mm/mV on the Graphic LCD Screen.

#### Device Volume

- 1~10: Sets the volume of the device between 1~10 in units of 1.
- **AUTO**: The default volume is set to 7, and automatically changes depending on the level of surrounding noise.

#### Graphic Indication

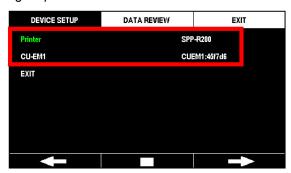
- · ON: Includes an image guide when the device is operated.
- · **OFF**: Does not include an image guide when the device is operated.

#### Voice Instruction

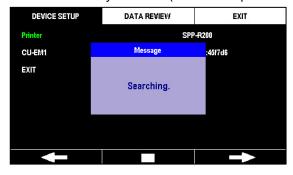
- · **Detail:** Gives detailed guidance on how to operate the device.
- **Short:** Gives simple guidance on how to operate the device. This option is not recommended to the general public who are not licensed in rescue procedures.

#### External Device

Pairs the CU-SP2 with the printer and CU-EM1 (ECG transmission device). Selecting 'External Device' displays 'Printer' and 'CU-EM1' on the left side of the screen. The model number of devices currently connected to the CU-SP2 are displayed on the right. If no device is paired, the right spaces will be left blank.



First, select the device to pair from the options on the left. After selecting, the CU-SP2 will search for nearby devices. (Searches up to 5 devices.)



After searching, the CU-SP2 displays the list of searched devices on the right side of the screen.

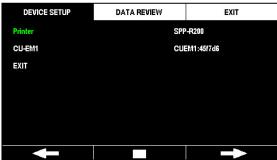


If no device is found, the CU-SP2 will display the following message for 3 seconds and return to the previous page.



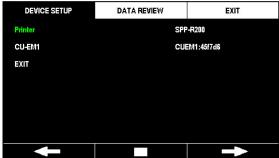
Check and select a device from the list to pair with the CU-SP2. After selecting, the CU-SP2 will test connection with the selected device. After testing, the CU-SP2 will save the connection information and return to the previous page.





If connection fails during the test, the CU-SP2 will display the following message for 3 seconds and return to the previous page.





#### NOTICE

- The CU-SP2 can only communicate with the devices designated by the manufacturer.
- Before pairing the CU-SP2 with an external device (Printer, CU-EM1), turn on the power of the device to be connected.
- When the CU-SP2 is paired with an external device, the external device will operate as follows:
  - · Printer: Displays the message "You can use this printer!"
  - · CU-EM1: 3 long beeps.

 The Printer and CU-EM1 are not part of the standard package contents. If you want to purchase them, please contact us by referring to [Appendix A: Parts and Accessories] of these Instructions for Use.

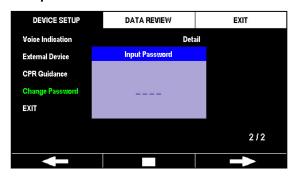
#### CPR Guidance

· Refer to [Section 5.4.3: Setting the CPR Guidance] in these Instructions for Use.

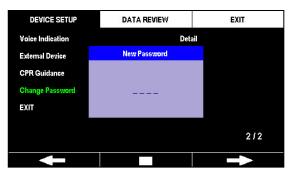
#### Change Password

The default password of the device is Soft Key '1→1→1→1', (Soft Keys are labeled 1~3 from left to right.) and the password is a combination of the three Soft Keys. Settings that demand the password under Device Setup have varying authorities depending on the setting. We recommend to change the password after receiving the CU-SP2 in order to prevent access by unauthorized users. Also we recommend that you change the password on a regular basis to prevent password exposure. The password is changed in the following 3 steps:

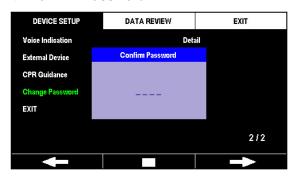
#### ① Input Password



#### ② New Password



# **3 Confirm Password**



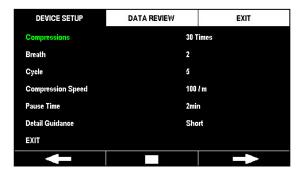
# - Device Setup

	- Device Setup					
No.	Setup Option	Set Value	Default			
1	Device Mode	AED Mode	AED Mode			
		Manual Override	AED Wode			
		ANALYZE,				
2	Manual Override	CHARGE,	OFF			
		OFF				
	Adult / Pediatric	Adult Mode,	A d. 14 Ma d a			
3	Mode	Pediatric Mode	Adult Mode			
		Fixed 150J,				
	Obsals Fasses	Fixed 200J,	Fired 450 I			
4	Shock Energy	Escalating (150J-200J),	Fixed 150J			
		Escalating (150J-150J -200J)				
	ECG Gain	5mm/mV,				
_		10mm/mV,	40 ( ) (			
5		20mm/mV,	10mm/mV			
		AUTO				
	5	1~10,	AUTO			
6	Device Volume	AUTO	AUTO			
-	Graphic Indication	ON,	OFF			
7		OFF	OFF			
8	External Device	-	-			
9	CPR Guidance	-	Refer to [Table 2] of [Section			
			5.4.3: Setting the CPR			
			Guidance]			
40	Change		0.4 (4.4.4)			
10	Password	-	Soft Key '1-1-1'			

# 5.4.3 Setting the CPR Guidance

The CU-SP2 complies with the 2011 Korea Guidelines for CPR recommended by the Korean Association of Cardiopulmonary Resuscitation (KACPR) and the 2010 Guidelines for CPR recommended by the American Heart Association (AHA). The default CPR is set to 5 cycles of 30 chest compressions followed by 2 artificial respirations. Also, the CU-SP2 provides the user with a function enabling CPR guidance. The user can set the following items at 'CPR Guidance' under 'Device Setup' in Menu Mode.

- · Compressions
- · Breath
- · Cycle
- · Compression Speed
- · Pause Time
- · Detail Guidance



# - Setting the CPR Guidance

No.	Setup Option	Range	Unit	Default	Default Description
1	Compressions	15, 30 times	15 times	30 times	Executes 30 chest compressions.  In Adult Mode, the number of chest compressions is fixed to 30 times.
2	Breath	0~2 times	1	2	Executes 2 artificial respirations.
3	Cycle	2~10 times	1	5	Executes 5 cycles of chest compression and artificial respiration.
4	Compression Speed	100~ 120 times	5/m	100/m	Executes chest compression at a speed of 100 times per minute.
5	Pause Time	30~180 sec.	30 sec.	120 sec.	Pauses CPR for 120 sec. (2 min.)
6	Detail Guidance	ON, OFF	-	OFF	Does not provide detailed voice guidance on chest compression and artificial respiration during CPR.

#### NOTICE

- The CU-SP2 does not provide Detail Guidance on chest compression and artificial respiration during CPR by default. To receive Detail Guidance, change the Detail Guidance setting to 'ON'. Once Detail Guidance is set to 'ON', the device will provide detailed voice instructions on CPR.
- The CU-SP2 will give voice instructions on applying chest compression for 2 minutes when setting Detail Guidance to 'OFF' and Breath to '0', regardless of other CPR settings. It will then automatically reanalyze the patient's ECG. Once the device starts to reanalyze the patient's ECG, immediately stop applying chest compressions and do not touch the patient.

# 6. Maintenance

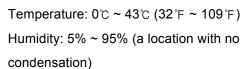
# 6.1 Device Storage

Please refer to the precautions below when storing the device.

# Do not store in an environment with large fluctuations in temperature.

# **Storage Environment**

The device is connected to the pads and battery pack, and is ready for immediate use in case of an emergency.



## **Transportation Environment**

The device is not connected to the pads and battery pack, and is separately stored for a long period of time or while being transported.

Temperature:  $-20^{\circ}$ C ~  $60^{\circ}$ C ( $-4^{\circ}$ F ~  $140^{\circ}$ F) Humidity: 5% ~ 95% (a location with no condensation)



Do not store the device under direct sunlight.



Do not store the device in a moist environment.



Do not store the device near electric heating appliances.



Do not store the device where it is susceptible to excessive shock or vibration.



Do not store the device where it is exposed to chemicals or explosive gas.



Take care not to allow dust, particularly metallic particles, into the device.



Do not dismantle or disassemble the device.

The manufacturer will not be held liable in such cases.

#### 6.2 Maintenance

## 6.2.1 Device Inspection

This device provides a self-test. The device performs a self-test as soon as the battery is inserted, automatically turns off after the test is completed, and regularly turns on to perform the self-test. If the user wants to initiate the self-test, remove the battery and then reinsert. For further details on self-tests, please refer to [Section 7.1: Self-Tests] in these Instructions for Use.



• We recommend to regularly inspect this device to prepare for emergencies.

There are two supplies that must always be inspected upon storing the device.

- · Since the device cannot be used in an emergency if the battery level is low, you must regularly check the self-test results.
- · Since the appropriate amount of energy cannot be delivered to the patient in an emergency if the pads are in poor condition, you must regularly check the expiration date on the pads.

#### 6.2.2 Recharging and Replacing the Battery

1 Battery Pack (Rechargeable)

#### Replacing the battery pack

- · The battery pack should be exchanged with a fresh one and recharged if it is low. For further details on checking the battery status, please refer to [Chapter 7: Troubleshooting] in these Instructions for Use.
- · You must use only a battery pack provided by the manufacturer.

# How to replace the battery pack

1. Remove the spent battery pack by pulling it out while pressing the locking mechanism on the bottom of the device. Refer to the figure below.







2. Insert a new battery pack in the direction of the arrow with the label facing upward as shown in the figure below.



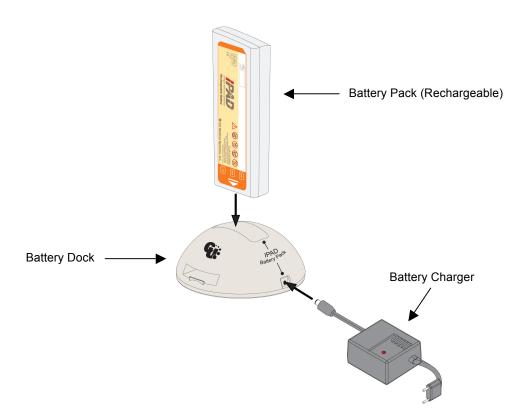
3. Push the battery pack in until you hear a "click".





#### How to recharge the battery pack

- · Rechargeable batteries that are low can be reused after recharging.
- · You can recharge the battery by using the Battery Charger and Battery Charge Dock provided by the manufacturer.
- · Familiarize yourself with the Battery Charger manual before use.
- The red LED lights up on the Battery Charger when charging, and the green LED lights up when charging is complete.
- · Refer to the figure below for charging the Battery Pack (Rechargeable).



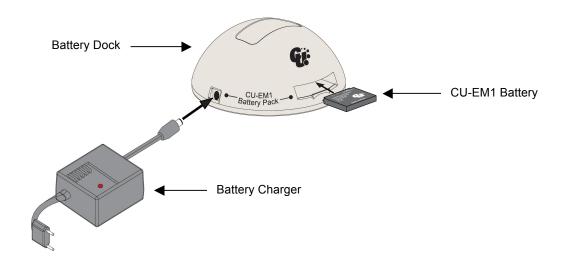
#### ② Battery Pack (Disposable)

#### Replacing the battery pack

- · The battery pack should be replaced if the battery is low. For further details on checking the battery status, please refer to [Chapter 7: Troubleshooting] in these Instructions for Use.
- · You must use only a battery pack provided by the manufacturer.
- · The disposable battery pack used in this device is not rechargeable. Do not insert the disposable battery pack into the Battery Charge Dock.
- · The Battery Pack (Disposable) can be replaced in the same manner as the Battery Pack (Rechargeable).

## ③ Charging the CU-EM1 Battery

- · Rechargeable batteries that are low can be reused after recharging.
- · You can recharge the battery by using the Battery Charger and Battery Charge Dock provided by the manufacturer.
- · The red LED lights up on the Battery Charger when charging, and the green LED lights up when charging is complete.
- · Refer to the figure below for charging the Battery Pack (Rechargeable).





# Precautions for using the battery pack

- · Do not subject to impact, disassemble or damage the device.
- · Do not place the device near hot objects such as heating appliances.
- · Do not keep the battery pack near metal objects. This may cause a short-circuit.
- · Keep out of the reach of children.
- Do not use a battery pack that is externally damaged (e.g., leakage); replace it with a new one.

If the leakage gets into the eye, immediately wash with water and consult with a physician.

- · Do not store the device under direct sunlight.
- · Do not store the device in a wet or highly humid place.
- · Comply with local regulations when disposing of the device.
- · Do not burn or make a hole in the device.
- Do not insert the disposable battery pack into the Battery Charge Dock to recharge.

# Rechargeable batteries may induce hazards including inflammation, fire, and explosion. Please comply with the following:

- · Batteries whose casing is visibly swollen may be hazardous. Immediately contact the manufacturer or distributor.
- · Use only a genuine Battery Charger designated by the manufacturer.
- · Do not leave the battery inside a vehicle during summer.
- · Use a lithium secondary battery guaranteed by the manufacturer.
- · Do not expose the battery to high heat above 60℃.
- The battery's performance may temporarily drop in low temperatures. We recommend not to store or use the battery in a low temperature environment.

## 6.2.3 Replacing the Pads

- · You cannot use expired pads.
- · Check if the pads package is damaged.
- · You should use only the pads provided by the manufacturer.

#### How to replace pads

1. Check the expiration date of the pad. Refer to the figure below for checking the expiration date.





The expiration date is marked to the left of the "Multifunction Defibrillation ADULT PADS" label on the pads package.

The expiration date is indicated as follows:

MM / YYYY

MM – Month

YYYY - Year

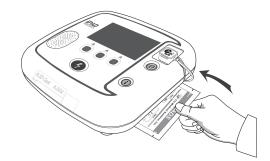
Used or expired pads should be replaced. Pull out the top and bottom of the pads connector with your fingers and take the pads out from the Pads Storage Compartment. Refer to the figure below.





Insert the pads connector of the new pads into the Pads Connector Insert, and then put the Pads Package in the Pads Storage Compartment. Refer to the figure below.





# 6.2.4 Cleaning the i-PAD CU-SP2

Always clean the device and accessories with a soft cloth. The following detergents may be used to clean the exterior surface of the device:

- · Light soapy water
- · Light chlorine bleach (dilute 30ml of chlorine bleach per 1 liter of water)
- · Light ammonia compound
- · Light hydrogen peroxide

# ( CAUTION

- Do not immerse the device or accessories in liquid or detergent.
- Be careful not to allow any liquids to get into the device.
- If the device is immersed, immediately contact the manufacturer or a service center certified by the manufacturer.
- Applying excessive force or shock while cleaning the device may result in malfunction.
- Do not use an acetone-based strong detergent or abrasive to clean the device.
- Do not use a detergent containing abrasive ingredients.
- Do not sterilize this device.

# 6.2.5 Disposal

Appropriately dispose of the CU-SP2 and accessories in accordance with local regulations.

# 7. Troubleshooting

# 7.1 Self-Tests

There are several types of self- test. Each self-test examines different contents. Refer to the table below for details.

Self-Test Type	Description
Battery Pack Self-Test	Perform the battery self-test of inserting the battery pack in the following events:  When initially purchasing the device When inspecting the equipment after use When replacing the battery pack When the device is damaged  The device checks the Shock Button, i-Button, and Soft Keys during the self-test. During the battery self-test, the user should perform the device check by pressing buttons according to the voice or screen instructions. Also, check the connection status of the pad connector as well as the pad status during the self-test. If the self-test is successful, the device will automatically shut down.  If the self-test is not successful, the i-Button flashes in red. When pressing the i-Button according to the voice instruction, the device will automatically shut down after reporting the error by voice and LCD Screen. For further details, please refer to [Section 7.3: Troubleshooting] in these Instructions for Use.  The battery self-test performs a very detailed inspection, which takes about 20 seconds. If an emergency occurs during the battery self-test, turn the device off by pressing the Power Button. Then, turn it back on by pressing the Power Button and quickly respond to the emergency by following the voice instructions.
Power Self-Test	The device performs a power self-test when turning on the device by pressing the Power Button.
Real-time Self-Test	The device checks itself in real-time during operation.
Periodic Self-Test	This device periodically performs a self-test once every day, week and month. The periodic self-test checks important features of the device, such as the battery status, pad status and internal circuits.

If the self-test fails during operation and defibrillation cannot be administered, the device will instruct you to get a replacement defibrillator and will guide CPR by voice. To learn more about the error, first press the Power Button to turn off the device. Press and hold down the i-Button, and the device will notify the error by voice and LCD Screen, and then automatically shut down. For further details, please refer to [Section 7.3: Troubleshooting] of these Instructions for Use.

# 

- Since the CU-SP2 performs a self-test on a daily basis, you do not need to frequently perform a self-test for the battery pack. Frequently self-testing the battery pack consumes battery power and shortens the battery life.
- Periodically check if the i-Button flashes in red in order to prepare for emergencies.
   If the i-Button flashes in red, please refer to [Section 7.3: Troubleshooting] in these Instructions for Use.

# 7.2 Device Status

The device notifies the user of its status in the following ways:

Indicator	Description	Remarks
	The device detected an error (e.g., low	
i-Button: Flashing in red	battery).	
	Press the i-Button to identify the error.	
Shock Button: Flashing in	The device is ready to deliver an electric	
Shock Button: Flashing in orange	shock. Press the Shock Button to deliver	
	an electric shock.	

# 7.3 Troubleshooting

The device informs you of its current status or of problems via status indicators, beeps, and/or voice instruction. Refer to the following for details:

Symptom/Voice Instruction	Cause	Resolution
Voice Prompt :		
"Low battery",	The heattern is law.	Replace the battery with a
"Replace the battery with a new	The battery is low.	new one.
one."		
Voice Prompt :	The Pads Connector is	Ensure the Pads
"Plug the pads connector into the	disconnected	Connector is properly
device."	disconnected	connected.
Voice Prompt :	The nade has been	Replace the pads with a
" Used pads",	The pads has been previously used.	new one.
"Replace the pads with a new one"	previously used.	new one.
Voice Prompt :		
" The pads are beyond their	The pads has expired.	Replace the pads with a
expiration date",		new one.
"Replace the pads with a new one"		
Voice Prompt :	The pads is not properly	Check if the pads is
" Press the pads firmly to the bare	attached to the patient's	securely attached to the
skin of the patient"	skin.	patient's skin.
		Press the pads firmly to the
Voice Prompt :	The pads is not properly	patient's skin.
" No shock delivered"	adhering to the patient's	Shave chest hair or wipe
No shock delivered	skin.	off moisture if necessary
		before attaching the pads.
	Although an electric shock	Deliver an electric shock by
Voice Prompt :	is needed, the Shock	pressing the Shock Button
" Shock button was not pressed"	Button was not pressed	with the next voice
	within 15 seconds.	instruction.

- If the problem cannot be solved during an emergency, you should follow the following steps:
  - ① Quickly replace the defibrillator if possible.
  - ② If no replacement device is available, check the patient's condition and perform CPR as necessary. Continuously check the patient's condition and perform CPR until the emergency medical services arrives.

# 8. Device Service

#### **Device Warranty**

Device Name	Model Name	
Purchase Name	Serial No.	
Distributor	Person in Charge	

- This device is warranted by CU Medical Systems, Inc. against defects in materials and workmanship for five full years from the date of original purchase. During the warranty period, we will repair or, at our option, replace at no charge a device that proves to be defective, provided you return the device, shipping prepaid, to us or to our authorized representative.
- This warranty does not apply if the device has been damaged by accident or misuse or as the
  result of service or modification by entities other than CU Medical Systems, Inc. or its
  authorized representatives. IN NO EVENT SHALL CU MEDICAL SYSTEMS BE LIABLE FOR
  CONSEQUENTIAL DAMAGES.
- Only devices with serial numbers and their accessories are covered under this warranty.
   PHYSICAL DAMAGE CAUSED BY MISUSE OR PHYSICAL ABUSE IS NOT COVERED UNDER THE WARRANTY. Items such as cables and modules without serial numbers are not covered under this warranty.

#### **Warranty Disclaimer**

The following renders this warranty null and void:

- · Servicing by unauthorized personnel.
- · If the factory seal is broken without proper authorization from CU Medical Systems, Inc.
- · Failure or damage caused by a fall or external shock after purchase
- · Damage by natural disasters such as fire, earthquake, flood and/or lightning
- · Failure or damage by environmental pollution or abnormal voltage
- · Damage caused by storage in conditions beyond the specified limits.
- · Failure due to depletion of consumables
- · Failure caused by sand and/or soil getting inside the device
- · The purchase date, customer name, distributor name, batch number and other listed information being arbitrarily changed
- · No proof of purchase provided along with the device warranty
- · Usage of accessories and parts not recommended by the manufacturer.
- · Other failure or damage caused by inappropriate operation.

#### Service

- The i-PAD CU-SP2 must be serviced only by authorized personnel.
- The i-PAD CU-SP2 will be serviced free of charge during the warranty period. After the warranty period, the cost of material and service shall be shouldered by the user.
- When the i-PAD CU-SP2 is not operating properly, immediately bring it for servicing to an authorized service center.
- Please fill out the following table with the necessary information when requesting for service.

Device classification		Semi-Automated	Semi-Automated External Defibrillator				
Device Name		i-PAD	Model Number	CU-SP2			
Serial I	Number		Date of Purchase				
Sales Rep	resentative						
User	Name						
Information	Address						
IIIIOIIIIalioii	Contact no.						
	Brief description of the problem						

# **Appendix**

# A. Parts and Accessories

To order replacement parts and accessories, cite the part and ordering numbers given in the following table.

A.1 Standard Accessories					
Name	Part Number	Ordering Number			
Adult Pads (disposable)	CUA1007S				
Rechargeable Battery Pack	CUA1203RB				
Instructions for Use	SP2-OPM-E-01				
Battery Adapter	K-820 Kkamnyng				
Battery Charge Dock	CUA1207CH				
A.2 Optional Accessories					
Carrying Case	SP2-A-BAG-3010				
Disposable Battery Pack(Long-life)	CUSA1103BB				
Pediatric Pads (disposable)	CUA1102S				
IrDA Adapter	IR-220LPLUS				
PC S/W	CU Expert ver. 3.70 or higher				
SD Card	HD1-CARD-SD				
SD Card Reader	HD1-CARD-READER				
Printer	SPP-R200				
ECG Transmission Device	CU-EM1				

# **B.** Description of Symbols

# **B.1 CU-SP2 Defibrillator**

Symbol	Description			
	Power Button (ON/OFF)			
i	i-Button			
4	Shock Button			
1 <b>*</b>	BF Type, defibrillation-proof equipment			
$\triangle$	Caution: Refer to related documents.			
<b>C€</b> <sub>0470</sub>	Europe CE Certification			
SN	Serial Number			
~~\	Manufactured Date			

# **B.2 CU-SP2 Packaging**

Symbol	Description
6	Stacking No. (Up to 6)
<u> </u>	Load Upwards
<b></b>	Avoid Moisture
<b>Y</b>	Fragile
*	No Hooking
43C 110F 32F	Temperature Limit: Store at a temperature between 0℃ ~ 43℃.
<b>C€</b> <sub>0470</sub>	Europe CE Certification
SN	Serial Number

### **B.3 Accessories**

### **B.3.1 Rechargeable Battery Pack**

Symbol	Description
Li-lon <sup>1</sup>	Lithium Ion Battery
LOT	LOT Number
	KC Safety Certification
~~~	Manufactured Date
8	Do Not Dissemble: Do not cut the battery or open the battery case.
8	Avoid Fire: Do not burn the battery or expose it to high heat or flame.
8	Do not break or apply pressure on the battery.
X	Do not discard the battery indiscriminately. Discard in accordance with local regulations.
	Caution: Refer to related documents.
(€	Europe CE Certification

#### B.3.2 Pads

Symbol	Description		
32F 43C 32F	Temperature Limit: Store at a temperature between 0℃ ~ 43℃.		
LOT	LOT Number		
	Expiration Date		
REF	Reference Order Number		
2	Disposable (Do Not Reuse)		
$\bowtie$	Do not fold or crush this product.		
Contains no Latex	Contains no Latex		
	Expiration Date		
<u></u>	Caution: Refer to related documents.		
(6	Europe CE Certification		

### C. Glossary

1 CPR consists of 5 cycles. (When the device is set to 5 cycles as

default)

**1 Cycle** Refers to 30 chest compressions followed by 2 breaths during

CPR. (When the device is set to the default setting [30:2])

If you specify the number of compression and number of breath, the cycle is performed in accordance with the specified protocol.

Refer to [Section 5.4: Device Setup] for detailed setting method.

**Abrasive** A material used to sharpen and clean the surface of metal, glass,

stone and wood, which includes emery, quartz powder and glass

dust. Do not use these abrasives to clean the device.

Adhesive Material

on the Pads

(Gel)

The adhesive material on the pads is very important for

maintaining the optimum adhesion between the skin and pads. Therefore, never open the pads package when the pads is not

needed, and periodically check the expiration date of the pads.

Adult The adult in these Instructions for Use is defined as a person who

is older than 8 years or heavier than 25 kg.

American Heart
Association (AHA)
2010 CPR

Guidelines

The default settings of this device direct the you to perform CPR immediately after one electric shock in accordance with the 2010

CPR Guidelines. Also, the CPR guide is composed of 5 cycles

with the chest compression to ventilation ratio of 30:2 (if the device

is set to a default setting of 5 cycles, 30:2).

If you are not trained in ventilation, perform only the chest

compression. Refer to [Section 5.4: Device Setup] for the CPR

setting. Please contact the manufacturer for additional information.

**Arrhythmia** An abnormal heart rhythm.

Battery Pack A disposable or rechargeable battery pack that supplies power to

the device.

Cardiac Arrest
Patient

A patient with cardiac arrest symptoms. This device should be used for the patient with the following symptoms: No response, no movement and no normal breathing.

Communication Port

A port that sends and receives data between the device and PC.

Condensation

Moisture has an adverse effect on the device when condensation is formed on the device surface. The device should be stored in a dry environment without excessive humidity.

**CPR Mode** 

The device provides guidance for CPR while pausing analysis of the patient's ECG such that you can easily perform CPR. The CPR mode on this device complies with AHA's 2010 CPR Guidelines. Refer to [Section 4.3., Step 3: Perform CPR] for more information.

Defibrillation

Is a process in which an electronic device gives an electric shock to the heart. This helps reestablish normal contraction rhythms in a heart having dangerous arrhythmia or in cardiac arrest.

Defibrillator Pads
Connector

A connector on the device that is used to connect the device with defibrillator pads.

**Device** 

The Device referred to in these Instructions for Use is a Semi-Automated External Defibrillator (AED) for which the model name is CU-SP2, a product from the i-PAD product family of the manufacturer.

Disposable Battery Pack A disposable battery pack that supplies power to the device and cannot be recharged. Replace expired or spent batteries with a new battery pack.

**ECG** 

An abbreviation for electrocardiogram. A record of the heart's electrical rhythm as detected by the defibrillation pads.

Electric Shock This device charges large energy in a short time and performs

defibrillation via an electric shock.

**Error** A status in which the device does not properly operate. Refer to

[Section 7.3: Troubleshooting] for more information.

**Fibrillation** Refers to an irregularity of the heart causing ineffective circulation.

Ventricular fibrillation is accompanied with an acute cardiac arrest.

**Flashing** A status in which the indicator is flashing.

i-Button The button for checking the most recent device usage, displaying

error messages, transferring ECG and event data, etc.

Internal discharge

(disarm)

The i-PAD CU-SP2 dumps the charge in its defibrillating capacitor into an internal load If you do not press the Shock Button or if the

device determines that the patient does not need an electric shock

due to the change in the patient's ECG.

IrDA Port A communication port that sends and receives data between the

device and computer. Since this IrDA port utilizes light (infrared), care needs to be taken to reduce interference. Refer to the [CU

Expert] manual for more information.

**Light** A status in which the indicator is lit.

Operation Mode The mode in which the device monitors the patient or executes

CPR/defibrillation when turned on.

Pads The pads stated in these Instructions for Use refers to a pads

(disposable) for defibrillation.

Pad 1 Refers to a pad that is placed under the right clavicle. Please refer

to the picture on the pad. (The position may be switched with pad

2.)

Pad 2 Refers to a pad that is placed on the ribs on the patient's lower left

chest directly under the armpit. Please refer to the picture on the

pads (the position may be switched with pad 1).

Pads Connector The connector on the pads that is used to connect the pads with

the i-PAD CU-SP2.

Pairing The process of connecting the Device with an external Bluetooth

device for communication.

PC S/W CU Expert PC softw

(CU-EX1)

**Battery Pack** 

PC software used to modify the settings of the i-PAD CU-SP2 and to manage treatment data. Refer to the appendix on accessories if

you want to purchase this software.

**Pediatric** The child in these Instructions for Use is defined as a person who

is older than 1 year and younger than 8 years as well as lighter

than 25 kg.

**Power Button** A green button on the front of the device. The device turns on

when the Power Button is pressed during Standby Mode, and it turns off when the Power Button is pressed for one second while the device is on. If the Power Button is pressed during the battery

insertion test, the battery insertion test is canceled.

Pads liner The liner that protects the conductive gel of the pads during

storage inside the pads pouch.

**Rechargeable** A rechargeable battery pack that supplies power to the device,

which can be reused after recharging. Recharge and reuse low

batteries.

SD Card An external memory card that could be used to store treatment

data (ECG and event) from the internal memory of the device.

Self-Test Self diagnostic tests that verify the proper operation of the

subsystems of the device.

Semi-Automated

External

Periphiliator
(AED)

Shock Button

The button that you must press to deliver an electric shock to a cardiac arrest patient.

The standby mode where the device executes periodic self-tests for use under emergency situations.

We Refers to CU Medical Systems Inc.

# D. Device Specifications

Model Name: CU-SP2

Product Exterior

**Category** General Specifications

**Dimensions** 260mm x 256mm x 69.5mm (Width x Length x Height)

**Weight** 2.4kg (Including the battery pack and pads)

**Environmental Conditions** 

**Category** General Specifications

Operating Environment (The device can be used immediately in case of an emergency.)

**Temperature**:  $0^{\circ}$ C ~  $43^{\circ}$ C ( $32^{\circ}$ F ~  $109^{\circ}$ F)

**Humidity**: 5% ~ 95% (a location with no condensation)

**Storage Environment** (The device has pads and a battery and is ready to be used for an emergency.)

**Temperature**:  $0^{\circ}$ C ~  $43^{\circ}$ C ( $32^{\circ}$ F ~  $109^{\circ}$ F)

**Humidity**: 5% ~ 95% (a location with no condensation)

**Transportation Environment** (The device does not have pads and a battery and is separately stored or transported over a long period of time.)

Temperature:  $-20^{\circ}$ C  $\sim 60^{\circ}$ C  $(-4^{\circ}$ F  $\sim 140^{\circ}$ F)

**Humidity**: 5% ~ 95% (a location with no condensation)

**Altitude** 0 to 15,000 feet (operational and storage)

**Drop** Withstands 1.2-meter drop to any edge, corner, or surface **Vibration** Operating: Meets MIL-STD-810G Fig.514.6E-1, random

Standby: Meets MIL-STD-810G Fig.514.6E-2, swept

sine(helicopter)

Sealing IEC 60529: IP55

**ESD** Meets IEC 61000-4-2:2001

**EMI (Radiated)** Meets IEC 60601-1-2 limits, method EN 55011:2007 +A2:2007,

Group 1, Class B

**EMI (Immunity)** Meets IEC 60601-1-2 limits, method EN 61000-4-3:2006 +A1:2008

Level 3 (10V/m 80MHz to 2500MHz)

**Defibrillator** 

Category General Specifications

Operation Type Semi-automated External Defibrillator

Output Type e-cube biphasic (Truncated exponential type)

Output Energy - AED Mode

 $\cdot$  150J, 200J at 50 $\Omega$  load for adults

 $\cdot$  50J at 50 $\Omega$  load for children

- Manual Override (Not Option)

· 2J, 3J, 5J, 7J, 10J, 20J 30J 50J 70J, 100J, 150J, 200J

Charge Control Controlled by an automated patient analysis system

**Charge Time** For the first defibrillation of a new battery, capable of administering

shock within 9 seconds of the given voice instruction, "Need electric

At least 6 seconds from the completion of CPR to the shock delivery

shock."

• Voice instruction (Press the flashing orange button.)

Flashing Shock Button

• Beeper

Time from End of

**CPR to Administering** 

Shock

**Disarm** The device disarms the electric load under the following situations:

 When the patient's ECG is changed into a status that does not require defibrillation.

 When the Shock Button is not pressed within 15 seconds from the completion of the charge.

 When the equipment is turned off by pressing the Power Button for over 1 second.

 When the pad is detached from the patient's body or the pads connector is detached from the device.

· When the impedance of the patient is out of the range of defibrillation. ( $25\Omega \sim 175\Omega$ )

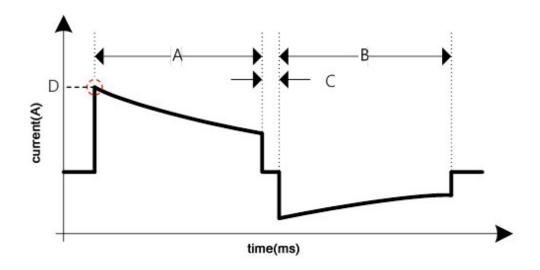
Electric Shock After charging is completed, the device delivers a defibrillating shock

to the patient when the Shock Button is pressed.

**Vector for**• The pads (Lead II) are placed anterior-anterior for the adult.

## **Administering Shock** • The pads are placed anterior-posterior for the child.

Patient Insulation BF Type, defibrillation protected



#### **Biphasic Truncated Exponential Type**

The shape of the waveform is automatically adjusted according to the patient's defibrillation impedance. In the graph, A is the duration of the first phase of the waveform, B is the duration of the second phase, C is the delay between phases (500µs), and D is the peak current.

#### **Output Waveform for Adults (200 Joules)**

Patient Impedance (Ohms, Ω)	First Phase Interval (milliseconds, ms)	Second Phase Interval (milliseconds, ms)	Peak Current (A)	Discharging Energy (Joules, J)	Energy Accuracy (Joules, J)
25	2.4	2.4	67.5	196.2	200 (±6J)
50	4.4	4.4	36	199.5	200 (±6J)
75	6.5	6.5	25	200.7	200 (±6J)
100	8.7	8.7	18.2	201.1	200 (±6J)
125	10.9	10.9	14.8	201.3	200 (±6J)
150	12.5	12.5	12.6	201.1	200 (±6J)
175	14.9	14.9	10.8	200.9	200 (±6J)

## **Output Waveform for Adults (150 Joules)**

Patient Impedance (Ohms, Ω)	First Phase Interval (milliseconds, ms)	Second Phase Interval (milliseconds, ms)	Peak Current (A)	Discharging Energy (Joules, J)	Energy Accuracy (Joules, J)
25	2.4	2.4	64.5	147.8	150 (±4J)
50	4.4	4.4	32.7	149.7	150 (±4J)
75	6.3	6.3	22.5	151.5	150 (±4J)
100	8.8	8.8	15.9	148.1	150 (±4J)
125	10.7	10.7	13.0	149	150 (±4J)
150	12.7	12.7	11.0	148.2	150 (±4J)
175	15.0	15.0	9.5	148.8	150 (±4J)

# Output Waveform for Children (50 Joules)

Patient Impedance (Ohms, Ω)	First Phase Interval (milliseconds, ms)	Second Phase Interval (milliseconds, ms)	Peak Current (A)	Discharging Energy (Joules, J)	Energy Accuracy (Joules, J)
25	2.3	2.3	35.4	50.2	50 (±2J)
50	4.3	4.3	18.4	50.7	50 (±2J)
75	6.3	6.3	12.3	49.7	50 (±2J)
100	8.5	8.5	9.1	49.5	50 (±2J)
125	10.6	10.6	7.3	50.3	50 (±2J)
150	12.7	12.7	5.8	49	50 (±2J)
175	15.0	15.0	4.9	49.6	50 (±2J)

**ECG Accuracy** 

Category General Specifications

ECG Acquisition Route Lead II

Response Frequency 1 Hz ~ 30 Hz

ECG Analysis System

Category General Specifications

**Function** Analyzes whether the rhythms of the patient's impedance and

ECG require a defibrillation

**Measured Impedance** 

\_\_\_\_

 $25\Omega \sim 175\Omega$ 

Range

Rhythm Requiring Defibrillation

- Ventricular fibrillation and several ventricular tachycardia

including ventricular flutter

- The CU-SP2 uses multiple variables to determine the

shockability of the heartbeat.

- Some extremely low amplitudes or low frequency heartbeats

are not interpreted as shockable VF beats. Also, some VT

beats are not interpreted as rhythms requiring defibrillation.

**Rhythm Not Requiring** 

Defibrillation

- ECG rhythms excluding those requiring a defibrillation

- When a rhythm that does not require a defibrillation is detected,

the device informs the user by voice to perform CPR.

Analysis Protocol Prepares to administer shock or give voice instructions on CPR

according to the analysis result

Algorithm sensitivity

and specifications that

require defibrillation

Satisfies AAMI DF80

#### **ECG Analysis System – ECG Database Test**

ECG Rhythm Class	Rhythms	Minimum test sample size	Performa nce goal	Test sample size	Shock Decision	No Shock Decision	Observed Performance	90% One Sided Lower Confidence Limit
SHOCKABLE	Coarse VF	200	>90% sensitivity	219	213	6	97.26% (213/219) sensitivity	95%
SHOCK	Fast VT	50	>75% sensitivity	137	111	26	81.02% (111/137) sensitivity	76%
	Normal Sinus Rhythm	100 minimum (arbitrary)	> 99% specificity	100	0	100	100% (100/100) specificity	97%
NON SHOCKABLE	AF,SB, SVT, heart block, idioventricular PVC's	30 (arbitrary)	> 95% specificity	219	1	218	99.54% (218/219) specificity	98%
	Asystole	100	> 95% specificity	132	5	127	96.21% (127/132) specificity	93%

- a. A Statement for Health Professionals from the AHA (American Heart Association) Task Force on AED,
   Subcommittee on AED Safety and Efficacy. Automatic External Defibrillators for Public Access
   Defibrillation: Recommendations for Specifying and Reporting Arrhythmia Analysis Algorithm
   Performance, Incorporating New Waveforms, and Enhancing Safety. Published 1997; 95:1677-1682.
- b. According to AHA Recommendations (a) and AAMI-based DF80, SVT is clearly included in the non shockable rhythm grade.

#### **Control Devices, Indicators, Voice Instructions**

**Category** General Specifications

Control Devices Power Button, i-Button, Shock Button, 3 Soft Keys

**Graphic LCD** Displays the operating status of the device and instructions

• Shock Button: Flashes in orange when the defibrillator is charged

and ready to deliver a shock.

• Blue i-Button: Flashes when guiding CPR, transferring treatment

data or setting the CPR mode.

• Red i-Button: Flashes when an error occurs.

**Speakers** Outputs voice instructions

• If the device determines, based on its settings, that the surrounding

environment is noisy and it cannot give accurate voice instructions,

it will automatically increase the volume for the user.

**Beeper** Outputs various beeps

Low Battery Check The check is automatically performed through periodical self-tests as

well as in real-time when the equipment is in use or the power is

turned on.

Low Battery Indicator

The Graphic LCD on the device indicates low battery along with voice

instructions and a flashing red i-Button.

**Voice Instruction** Guides the user via voice instructions.

Self-Tests ■

Auto • Power Self-Test / Real-time Self-Test

• Daily / Weekly / Monthly Self-Test

Manual Battery Pack Self-Test (performed when the user inserts the battery pack)

Battery Pack (Rechargeable)

**Category** General Specifications

Battery Type 12V DC, 1.9Ah Li-ion, rechargeable

Capacity For fully charged new batteries, at least 70 possible shocks

or 3 hours of operation at 25°C (77°F)

Standby Life (After Inserting the Battery)

If stored and managed in accordance with instructions in

the document:

At least 2 years from the date of manufacture

**Temperature Ranges for Storage and Use** 

Operating Environment

Temperature:  $0^{\circ}$ C ~  $43^{\circ}$ C ( $32^{\circ}$ F ~  $109^{\circ}$ F)

Storage Environment

Temperature:  $-20^{\circ}$ C  $\sim 60^{\circ}$ C ( $-4^{\circ}$ F  $\sim 140^{\circ}$ F)

Battery Pack (Disposable)

**Category** General Specifications

Battery Type 12V DC, 4.2Ah LiMnO<sub>2</sub>, disposable

Capacity For fully charged new batteries, at least 150 possible shocks

or 5 hours of operation at 25°C (77°F)

Standby Life (After Inserting the Battery)

If stored and managed in accordance with instructions in the

document:

At least 5 years from the date of manufacture

**Temperature Ranges for Storage and Use** 

Operating Environment

Temperature:  $0^{\circ}$ C ~  $43^{\circ}$ C ( $32^{\circ}$ F ~  $109^{\circ}$ F)

Storage Environment

Temperature:  $-20^{\circ}$ C  $\sim 60^{\circ}$ C ( $-4^{\circ}$ F  $\sim 140^{\circ}$ F)

Adult Defibrillation Pads

**Category** General Specifications

Type Adult

Pad Size 120 cm<sup>2</sup>

Cable Length dTotal 120cm (Inside: 95cm, Outside: 25cm)

Pad Storage Life At most 36 months from the date of manufacture

#### Pediatric Defibrillation Pads

**Category** General Specifications

**Type** Pediatric

Pad Size 46.43 cm<sup>2</sup>

Cable Length Total 120cm (Inside: 80cm, Outside: 40cm)

Pad Storage Life At most 30 months from the date of manufacture

#### Data Storage and Transmission

**Category** General Specifications

Infrared Data Association Able to communicate with a PC via IrDA

**Data Storage** Saves 3 events on the internal memory (up to 17 hours per

event)

SD Card Copies the ECG and event data from the device's internal

memory through the PC software (CU-Expert) in order to

check the ECG and event data

Bluetooth Uses Bluetooth to communicate with the Printer or the CU-

EM1 (ECG transmission device)

# E. Electromagnetic Compatibility

#### Guidance and manufacturer's declaration – electromagnetic emissions

The i-PAD CU-SP2 is intended for use in the electromagnetic environment specified below. The customer or the user of the i-PAD CU-SP2 should assure that it is used in such an environment.

Emissions Test	Compliance	Electromagnetic environment - guidance
RF Emissions CISPR 11	Group 1	The i-PAD CU-SP2 uses RF energy only for its internal function. Therefore, its emissions are very low and are not likely to cause any interference in nearby electronic equipment.
RF Emissions CISPR 11	Class B	The i-PAD CU-SP2 is suitable for use in all
Harmonic emissions IEC 61000-3-2	Not applicable	establishments, including domestic establishments and those directly connected to the public low-
Voltage fluctuations / flicker emissions IEC 61000-3-3	Not applicable	voltage power supply network that supplies buildings used for domestic purposes.

# ⚠ WARNING

The i-PAD CU-SP2 should not be used adjacent to or stacked with other equipment.
 If adjacent or stacked use is necessary, the i-PAD CU-SP2 should be observed to verify normal operation in the configuration in which it will be used.

# Guidance and manufacturer's declaration – electromagnetic immunity

The i-PAD CU-SP2 is intended for use in the electromagnetic environment specified below. The customer or the user of the i-PAD CU-SP2 should assure that it is used in such an environment.

Immunity Test	IEC 60601-1 test level	Complianc e level	Electromagnetic environment - guidance		
Electrostatic discharge (ESD) IEC 61000-4-2	±6 kV Contact ±8 kV air	±6 kV Contact ±8 kV air	Floors should be wood, concrete or ceramic tile. If floors are covered with synthetic material, the relative humidity should be at least 30%		
Electrical fast transient/burst IEC 61000-4-4	±2 kV for power supply lines ±1 kV for input/output lines	Not Applicable	Mains power quality should be that of a typical commercial or hospital environment		
Surge IEC 61000-4-5	±1 kV differential mode ±2 kV common mode	Not Applicable	Mains power quality should be that of a typical commercial or hospital environment.		
Voltage dips, short interruptions and voltage variations on power supply input lines IEC 61000-4-11	<5 % U <sub>T</sub> (>95% dip in U <sub>T</sub> ) for 0.5 cycles  40 % U <sub>T</sub> (60% dip in U <sub>T</sub> ) for 5 cycles  70 % U <sub>T</sub> (30% dip in U <sub>T</sub> ) for 25 cycles  <5 % U <sub>T</sub> (>95% dip in U <sub>T</sub> ) for 5 s	Not Applicable	Mains power quality should be that of a typical commercial or hospital environment. If the user of the i-PAD CU-SP2 image intensifier requires continued operation during power mains interruptions, it is recommended that the i-PAD CU-SP2 image intensifier be powered from an uninterruptible power supply.		
Power frequency (50/60 Hz) magnetic field IEC 61000-4-8	3 A/m mains voltage prior to ap	3 A/m	Power frequency magnetic fields should be at levels characteristic of a typical location in a typical commercial or hospital environment.		

# Guidance and manufacturer's declaration – electromagnetic immunity

The i-PAD CU-SP2 is intended for use in the electromagnetic environment specified below. The customer or the user of the i-PAD CU-SP2 should assure that it is used in such an environment.

Immunity IEC 60601 Test		Complia	Electromognetic environment guidence			
Test	level	nce level	Electromagnetic environment - guidance			
			Portable and mobile RF communications equipment should be used no closer to any part of the i-PAD CU-SP2, including cables, than the recommended separation distance calculated from the equation applicable to the frequency of the transmitter.			
			Recommended separation distance			
Conducted RF IEC 61000-4-6	3 Vrms 150 kHz to 80 MHz outside ISM bands <sup>a</sup>	3 Vrms	$d = \left[\frac{3,5}{V1}\right]\sqrt{P}$			
	10 Vrms 150 kHz to 80 MHz in ISM bands <sup>a</sup>	10 Vrms	$d = \left[\frac{12}{V2}\right]\sqrt{P}$			
Radiated RF IEC	10 V/m 80 MHz to 2,5 GHz	10 V/m	$d=[rac{12}{E1}]\sqrt{P}$ 80 MHz ~ 800 MHz			
61000-4-3	20 V/m 80 MHz to 2,5 GHz	20 V/m	$d=[rac{23}{E1}]\sqrt{P}$ 800 MHz ~ 2,5 GHz			
			where P is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer and d is the recommended separation distance in metres (m) <sup>b</sup>			
			Field strengths from fixed RF transmitters, as deter-mined by an electromagnetic site survey <sup>c</sup> , should be less than the compliance level in each frequency range <sup>d</sup> .  Interference may occur in the vicinity of			
			equipment marked with the following symbol:			

NOTE 1. At 80 MHz and 800 MHz, the higher frequency range applies.

**NOTE 2.** These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and refection from structures, objects and people.

The ISM (industrial, scientific and medical) bands between 150 kHz and 80 MHz are 6,765 MHz to 6,795 MHz; 13,553 MHz to 13,567 MHz; 26,957 MHz to 27,283 MHz; and 40,66 MHz to 40.70 MHz

The compliance levels in the ISM frequency bands between 150 kHz and 80 MHz and in the frequency range 80 MHz to 2.5 GHz are intended to decrease the likelihood that mobile/portable communications equipment could cause interference if it is inadvertently brought into patient areas. For this reason, an additional factor of 10/3 is used in calculating the recommended separation distance for transmitters in these frequency ranges

Field strengths from fixed transmitters, such as base stations for radio (cellular/cordless) telephones and land mobile radios, amateur radio, AM and FM radio broadcast and TV broadcast cannot be predicted theoretically with accuracy. To assess the electromagnetic environment due to fixed RF transmitters, an electromagnetic site survey should be considered. If the measured field strength in the location in which the i-PAD CU-SP2 is used exceeds the applicable RF compliance level above, the CU-SP2 should be observed to verify normal operation. If abnormal performance is observed, additional measures may be necessary, such as reorienting or relocating the i-PAD CU-SP2.

d Over the frequency range 150 kHz to 80 MHz, field strengths should be less than [V1] V / m.

# Recommended separation distances between portable and mobile RF communications equipment and the CU-SP2

The i-PAD CU-SP2 is intended for use in an electromagnetic environment in which radiated RF disturbances are controlled. The customer or the user of the i-PAD CU-SP2 can help prevent electromagnetic interference by maintaining a minimum distance between portable and mobile RF communications equipment (transmitters) and the i-PAD CU-SP2 as recommended below, according to the maximum output power of the communications equipment.

Dated	Separation distance according to frequency of transmitter [m]								
Rated maximum	150 kHz to 80 MHz	150 kHz to 80	80 MHz to 800 MHz		800 MHz to 2,5 GHz				
output power of	$d = \left[\frac{3.5}{V1}\right]\sqrt{P}$	$d = \left[\frac{12}{V2}\right]\sqrt{P}$	$d = \left[\frac{12}{E1}\right]\sqrt{P}$		$d = \left[\frac{23}{E1}\right]\sqrt{P}$				
transmitter	$u = {}^{\lfloor}_{V1} {}^{\rfloor}^{\vee}$	$u = [V2]^{V1}$							
[W]	V1 = 3 Vrms	V2 = 10 Vrms	E1 = 10 V/m	E1 = 20 V/m	E1 = 10 V/m	E1 = 20 V/m			
0.01	0.06	0.12	0.12	0.06	0.23	0.16			
0.1	0.11	0.38	0.38	0.19	0.73	0.36			
1	0.35	1.20	1.20	0.60	2.3.0	1.15			
10	1.11	3.79	3.79	1.90	7.27	3.64			
100	3.50	12.00	12.00	6.00	23.00	11.50			

For transmitters rated at a maximum output power not listed above, the recommended separation distance d in meters (m) can be determined using the equation applicable to the frequency of the transmitter, where P is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer.

**NOTE 1)** At 80 MHz and 800 MHz, the separation distance for the higher frequency range applies.

**NOTE 2)** The ISM (industrial, scientific and medical) bands between 150 kHz and 80 MHz are 6,765 MHz to 6,795 MHz; 13,553 MHz to 13,567 MHz; 26,957 MHz to 27,283 MHz; and 40,66 MHz to 40,70 MHz.

**NOTE 3)**An additional factor of 10/3 is used in calculating the recommended separation distance for transmitters in the ISM frequency bands between 150 kHz and 80 MHz and in the frequency range 80 MHz to 2.5 GHz to decrease the likelihood that mobile/portable communications equipment could cause interference if it is inadvertently brought into patient areas.

**NOTE 4)** These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and refection from structures, objects and people